

Substitute per letter dated 5/9/92

KANSAS MEDICAID STATE PLAN

Attachment 3.1-A
#13.d, Page 14b

REHABILITATION SERVICES LIMITATIONS

B. Behavior Management Services (Cont.)

10. a. (5). Specialized Treatment for High Risk, Impulsive Youth (Secure Care)
- (6). In-Home Therapy
- (7). Individual Therapy
- (8). Group Therapy
- (9). Family Therapy
- (10). Psychological Evaluation
- (11). Speech Therapy - Individual
- (12). Speech Therapy - Group
- (13). Occupational Therapy
- (14). Attendant Care
- (15). Partial Hospitalization
- (16). Observation/Stabilization
- (17.) Other Adoptive Support Services: Those services which are medically necessary, not previously listed, but directly related to the provision of adoptive support. These services include but are not limited to the following inpatient psychological services:

DRG 425	- Acute Adjustment Reactions and Disturbances of Psychosocial Dysfunction
DRG 426	-Depressive Neuroses
DRG 427	-Neuroses Except Depressive
DRG 428	-Disorders of Personality and Impulse Control
DRG 429	-Organic Disturbances and Mental Retardation
DRG 430	-Psychoses
DRG 431	-Childhood Mental Disorders

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REHABILITATION SERVICES LIMITATIONS

B. Behavior Management Services (Cont.)

10. b. Qualifications: Providers of Adoption Support Services are determined pursuant to a negotiated contract. Qualifications of individual providers are described under the specific services described above.
- c. Units of service are billed on a per diem basis but limited by the bundled case rate.
- d. Limitations: None.

11. Foster Care Services

- a. Description: A bundle of services, both residential and community based, to provide support structure and stabilization with the goal of achieving reintegration with the family, or permanency in the lives of the children within the contracted period. Individual services include:

- (1). Residential Foster Care - Level V
- (2). Residential Foster Care - Level VI
- (3). Therapeutic Foster Care
- (4). Community Based Residential Treatment for Dually Diagnosed Youth
- (5). Specialized Treatment for High Risk, Impulsive Youth (Secure Care)
- (6). In-Home Therapy
- (7). Individual Therapy
- (8). Group Therapy
- (9). Family Therapy
- (10). Psychological Evaluation
- (11). Speech Therapy - Individual
- (12). Speech Therapy - Group
- (13). Occupational Therapy
- (14). Attendant Care

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REHABILITATION SERVICES LIMITATIONS

B. Behavior Management Services (Cont.)

11. a. (15). Partial Hospitalization
(16) Observation/Stabilization
(17.) Other Adoptive Support Services: Those services which are medically necessary, not previously listed, but directly related to the provision of adoptive support. These services include but are not limited to the following inpatient psychological services:

DRG 425	- Acute Adjustment Reactions and Disturbances of Psychosocial Dysfunction
DRG 426	-Depressive Neuroses
DRG 427	-Neuroses Except Depressive
DRG 428	-Disorders of Personality and Impulse Control
DRG 429	-Organic Disturbances and Mental Retardation
DRG 430	-Psychoses
DRG 431	-Childhood Mental Disorders

- b. Qualifications: Providers of Adoption Support Services are determined pursuant to a negotiated contract. Qualifications of individual providers are described under the specific services described above.
- c. Units of service are billed on a per diem basis but limited by the bundled case rate.
- d. Limitations: None.

C. Alcohol and Drug Abuse Treatment Services

Community based alcohol and drug abuse treatment services reimbursed under the fee-for-service methodology. Services include:

1. Day Treatment

- a. Description: Comprehensive alcohol and drug addiction services and supportive services offered on less than a 24-hour basis. Services are based on an individualized treatment plan.

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REHABILITATION SERVICES LIMITATIONS**c. Alcohol and Drug Abuse Treatment Services**

Community based alcohol and drug abuse treatment services reimbursed at service rates set by the Secretary. Services include:

1. *Outpatient Services* - Individual or group counseling provides development of an individual treatment plan based on the findings of the Kansas Client Placement Criteria and the Addiction Severity Index, individual or group counseling services not to exceed 9 hours weekly, and discharge counseling. The number of treatment sessions will be determined by the appropriate Regional Alcohol and Drug Assessment Center and treatment counselors.
2. *Intensive Outpatient Counseling* - Intensive outpatient counseling provides development of an individual treatment plan based on the findings of the Kansas Client Placement Criteria and the Addiction Severity Index, individual or group counseling services of 10 hours or more weekly, and discharge counseling. The number of treatment sessions will be determined by the appropriate Regional Alcohol and Drug Assessment Center and treatment counselors.
3. *Adult Intermediate Treatment* - 24 hour a day residential treatment primarily for individuals over age 18. The program will include the services of a full time registered nurse. An individual treatment plan will be designed using the Kansas Client Placement Criteria and the Addiction Severity Index. Admission and length of stay will be determined by the appropriate Regional Alcohol and Drug Assessment Center and treatment counselors. Discharge counseling will be offered. Some programs will be coed while others will be limited to the treatment of women, some of whom will be accompanied to the program by their children.
4. *Youth Intermediate Treatment* - 24 hour a day residential treatment primarily for individuals under age 18. The program will include the services of a full time registered nurse. An individual treatment plan will be designed using the Kansas Client Placement Criteria and the Addiction Severity Index. Admission and length of stay will be determined by the appropriate Regional Alcohol and Drug Assessment Center and treatment counselors. Discharge counseling will be offered.

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Services will be provided by community based, licensed or certified alcohol and drug treatment programs who have a contract with the Kansas Foundation for Managed Care.

Eligibility for ADAS services will be determined by the geographically appropriate Regional Alcohol and Drug Abuse Assessment Center using standard criteria based on Kansas residency, income, and need for treatment.

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REHABILITATION SERVICES LIMITATIONS

C. Alcohol and Drug Abuse Services (Cont.)

4. Continuing Care Counseling:

- a. Description: Continued counseling and support with a consumer at intermittent periods for evaluation of total performance and to determine if the consumer requires further treatment.
- b. Qualification: Programs must be licensed by SRS and have been chosen through a competitive bid process to offer this service.
- c. Units of service are billed on a hourly basis.
- d. Limitations: There are no limitations.

D. Local Education Agency Rehabilitation Services

Kan Be Healthy Screening (EPSDT)

- a. Description: A health screening, at specific intervals, which consists of a health history, developmental assessment,, complete physical exam, vision screening, hearing test, urinalysis, blood test, immunizations, nutrition screen, anticipatory guidance and other test as needed and referrals for treatment. Vision and hearing tests are completed at the specified intervals for these tests.
- b. Qualifications: Registered Nurse certified by the Kansas Department of Social and Rehabilitation Services or a licensed physician.
- c. Units of service are billed on a per screen basis (fee for service).
- d. Limitations: There are no limitations.

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Rehabilitation Services

Rehabilitation services to children listed either on the child's Individual Education Plan (IEP) or the child's Individual Family Service Plan (IFSP). Services are based on a bundled rate reimbursement methodology and include:

1. Speech, Language and Hearing:
 - a. Description: Therapy designed to correct deficits or delays caused by organic conditions.
 - b. Qualifications: Professional licensed by the Board of Healing Arts.
 - c. Limitations: There are no limitations.
2. Occupational Therapy
 - a. Description: Therapy which uses work related skills to evaluate behavior and to restore consumers to health and social independence.
 - b. Qualifications: Professional individuals licensed by the Board of Healing Arts.
 - c. Limitations: There are no limitations.
3. Physical Therapy:
 - a. Description: Rehabilitation concerned with the restoration of function and prevention of disability following disease, injury, or loss of body parts. The therapeutic properties of exercise, heat, cold, electricity, ultraviolet and massage are used to improve circulation, strengthen muscles, encourage return of motion, and train and retrain an individual to perform the acts of daily living.
 - b. Qualifications: Professional individuals licensed by the Board of Healing Arts.
 - c. Limitations: There are no limitations.

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4. Nursing Services:

- a. Description: Nursing services include but are not limited to initial and ongoing assessments, communication with physicians, medication set-up and administration, invasive procedures, treatment and evaluation of wounds and individualized teaching of care procedures.
- b. Qualifications: Licensed Registered Nurse or Licensed Practical Nurse.
- c. Limitations: There are no limitations.

5. Health Screening:

- a. Description: An evaluation of a child conducted by a multi disciplinary team that may include, but is not limited to, developmental, psychological, speech & language, occupational therapy and physical therapy assessment.
- b. Qualifications: Professionals licensed by respective fields.
- c. Limitations: There are no limitations.

6. Vision Services:

- a. Description: Identification of the range, nature and degree of vision loss; the making of referrals for medical or other attention.
- b. Qualifications: Registered Nurse certified by the Kansas Department of Health and Environment.
- c. Limitations: There are no limitations.

7. Behavioral Rehabilitation Services:

- a. Description: Assessment, diagnostic and treatment services to obtain maximum reductions in behavioral dysfunctions, including, but not limited to, administration and interpretation of psychological tests, obtaining, integrating, and interpreting information about child's behavior.

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- b. Qualifications: Professional licensed by the Board of Healing Arts.
 - c. Limitations: There are no limitations.
8. Rehabilitative Assistance:
- a. Description: Assistance with behavior management, communication, ordered therapies (under the supervision of a licensed therapist), eating, personal hygiene, mobility, bladder and bowel requirements, and self-administered medication.
 - b. Qualifications: Providers must have training provided by the Department of Education.
 - c. Limitations: Limitations are set by the individualized treatment plan.
9. Medical Transportation:
- a. Description: Transportation of a child to sites of medically appropriate and necessary services. Including transportation of a caretaker or attendant when medically necessary.
 - b. Qualifications: As set by Department of Education.
 - c. Limitations: Similar transportation would be required if child was not in school setting.

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REHABILITATION SERVICES LIMITATIONS

E. Long-Term Head Injury Rehabilitation Services

Rehabilitation services for those individuals who have experienced a traumatic brain injury and choose to receive services in an institutional setting. Reimbursement is based on a fee-for-service methodology. Services are based on a plan of care signed by a physician and include:

1. Screening:
 - a. Description: Standardized assessment to determine and identify the needs of the consumer and assess whether they can benefit from home and community based services or services in a head injury rehabilitation facility.
 - b. Qualifications: Individuals must attend and be certified on training provided by SRS.
 - c. Units of service are billed on a per screen basis.
 - d. Limitations: Consumer must be brain injured and be between the ages of 18 and 55.
2. Evaluation:
 - a. Description: Evaluation to determine that the individual has been diagnosed with an external, traumatically acquired non-degenerative, structural brain injury resulting in residual deficits and disability. The consumer's needs will be evaluated and an individualized plan of care completed to identify services to respond to these needs.
 - b. Qualifications: Licensed physician.
 - c. Units of service are billed as a one day evaluation.
 2. d. Limitations: The consumer must be able to benefit from transitional living skills training.